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CONFIRMATION NO. 1726

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|---|---|--------------------------------|---|--|
| SERIAL NUMBER 10/728,726 | FILING OR 371(c) DATE 12/05/2003 RULE | CLASS 428 | GROUP ART UNIT 1774 | ATTORNEY DOCKET NO. NEX-101-US |
| APPLICANTS Thomas C. Burke, Greenfield, MA; Joseph D. Gagne, Holyoke, MA; | | | | |
| ** CONTINUING DATA ***** This appln claims benefit of 60/431,565 12/06/2002 | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 03/05/2004 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | | STATE OR COUNTRY MA | SHEETS DRAWING 5 | TOTAL CLAIMS 12 |
| Examiner's Signature <i>[Signature]</i> Initials <i>CF</i> | | INDEPENDENT CLAIMS 4 | | |
| ADDRESS 45464 | | | | |
| TITLE Controlled COF films | | | | |
| FILING FEE RECEIVED 493 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |